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Postal Service as Express Mail, Airbill No. EU098495419US, in an envelope
addressed to: Box Non-Fee Amendment, Commissioner for Patents,
Washington, DC 20231, on the date shown below.
Dated: December 19, 2002 Signature: *Staci Harris*
(Staci V. Harris)

Docket No.: HO-P02232US0

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Gustav Levander, et al.

Application No.: 09/889,772

Group Art Unit: 1772

Filed: January 12, 2000

Examiner: S. Nolan

For: MATERIALS FOR PACKAGING NICOTINE-
CONTAINING PRODUCTS

TRANSMITTAL LETTER

RECEIVED

Box Non-Fee Amendment
Commissioner for Patents
Washington, DC 20231

DEC 24 2002

TC 1700

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced
Patent Application:

1. Amendment (18 pages)
2. Information Disclosure Statement (2 pages)
3. IDS Citation Listing References (1 pages)
4. References (4)
5. Fee Transmittal
6. Check in the amount of \$180.00
5. Return Postcard

Our check in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p) is
enclosed. If, however, Applicant is in error, then please charge any fees to the standing
account of Fulbright & Jaworski L.L.P., Deposit No. 06-2375 under Order No. 10105701.

Dated: December 19, 2002

Respectfully submitted,

Melissa W. Acosta
By
Melissa W. Acosta

Registration No.: 45,872
FULBRIGHT & JAWORSKI L.L.P.
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PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

Complete if Known

Application Number	09/889,772
Filing Date	July 20, 2001
First Named Inventor	Gustav Levander
Examiner Name	S. Nolan
Group Art Unit	1772
Attorney Docket No.	HO-P02232US0

DEC 19 2002
TC 1700

METHOD OF PAYMENT

FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 06-2375

Deposit Account Name Fulbright & Jaworski, L.L.P.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	-** =	X	=
Independent Claims			
Multiple Dependent			

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

** or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

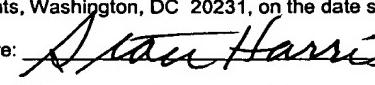
SUBTOTAL (3) (\$ 180.00)

SUBMITTED BY			
Name (print/type)	Melissa W. Acosta	Registration No. (Attorney/Agent)	45,872
Signature			
Date	December 19, 2002		

Fee Transmittal

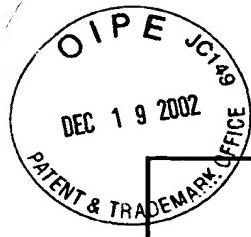
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Certificate of Express Mailing Under 37 CFR 1.10

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Date


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Staci Harris
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Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

IDS (Citation) by Applicant